

United States District Court
for
the District of Nevada

REQUEST FOR MODIFICATION
TO CONDITIONS OF SUPERVISION WITH CONSENT OF OFFENDER
Probation Form 49 (Waiver of Hearing) is Attached
January 24, 2021

Name of Offender: Julio Nunez

Case Number: 2:15CR00062

Name of Sentencing Judicial Officer: Honorable Andrew P. Gordon

Date of Original Sentence: October 26, 2016

Original Offense: Use of a Firearm, During and in Relation to, and in Furtherance of a Drug Trafficking Crime

Original Sentence: 42 Months prison, followed by 60 Months TSR.

Date Supervision Commenced: March 27, 2020

PETITIONING THE COURT

To modify the conditions of supervision as follows:

Substance Abuse Treatment – You must participate in an **inpatient** substance abuse treatment program and follow the rules and regulations of that program. The probation officer will supervise your participation in the program (provider, location, modality, duration, intensity, etc.). You must pay the costs of the program.

CAUSE

By way of case history, on October 12, 2021, a report was submitted to the Court indicating Nunez has violated his conditions. The report listed multiple violations of the drug testing program including a positive drug test for methamphetamine. At that time, our office requested no action be taken as there was no need for any modifications.

However, he incurred additional violations shortly thereafter. He tested positive for methamphetamine on October 13, 2021, October 20, 2021 and October 26, 2021. Additionally, his drug test on October 26, 2021, was also positive for cocaine.

RE: Julio Nunez

Prob12B
D/NV Form
Rev. June 2014

Additionally, Nunez missed scheduled drug tests on the following dates: October 22, 2021 and again on October 23, 2021. Nunez claimed he was ready to attend a higher level of care and return to his sober life but needed help. Therefore, he agreed to and was referred to intensive inpatient treatment through Westcare at Harris Springs Ranch.

Attached is a waiver of hearing form signed by the offender to modify his conditions accordingly. The offender was explained his right to a hearing and the assistance of counsel but waived those rights and agreed to the requested modification.

Respectfully submitted,



Digitally signed by
Kamuela Kapanui
Date: 2022.01.24
15:25:47 -08'00'

Kamuela K Kapanui
United States Probation Officer

Approved:



Digitally signed by Joy Gabonia
Date: 2022.01.24 15:16:24
-08'00'

Joy Gabonia
Supervisory United States Probation Officer

THE COURT ORDERS

- No Action.
- The extension of supervision as noted above.
- The modification of conditions as noted above
- Other (please include Judicial Officer instructions below):



Signature of Judicial Officer

January 26, 2022
Date

PROB/PTS 4
(03/05)

District of Nevada

ADMISSION/DENIAL REPORT

REPORT OF POSITIVE URINALYSIS

Name: Julie Nunez Docket No.: 44799 048

Date Sample Taken: _____ PACTS No.: 130136

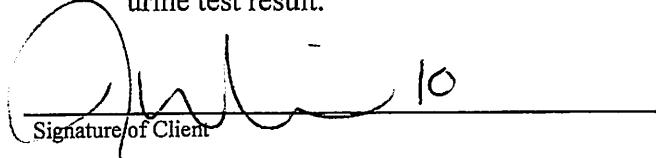
Results of Urinalysis: Positive For: _____

You are provided with written notice of a positive test result for a urine specimen submitted by you on the date indicated above. Use of prohibited substances (which includes drugs prescribed for someone other than you by a licensed physician) constitutes a violation of your release conditions. Positive test results, whether admitted or denied, are reported to the court and may result in a court hearing to determine if you are in violation of the conditions of your release. During this hearing you have the right to representation by counsel, and an attorney will be appointed for you if you cannot afford one.

I HAVE READ AND UNDERSTAND THIS NOTICE, AND I AM AWARE OF MY RIGHTS TO A HEARING.

Initial One:

I admit to illegal use of a prohibited controlled substance as indicated by the above-reported urine test result.
 I deny illegal use of a prohibited controlled substance as indicated by the above-reported urine test result.


Signature of Client

Witnessed By

Date

Date

Comments:

PROB 49
(3/89)

UNITED STATES DISTRICT COURT

District of Nevada

**Waiver of Hearing to Modify Conditions
of Probation/Supervised Release or Extend Term of Supervision**

I have been advised and understand that I am entitled by law to a hearing and assistance of counsel before any unfavorable change may be made in my Conditions of Probation and Supervised Release or my period of supervision being extended. By "assistance of counsel," I understand that I have the right to be represented at the hearing by counsel of my own choosing if I am able to retain counsel. I also understand that I have the right to request the court to appoint counsel to represent me at such a hearing at no cost to myself if I am not able to retain counsel of my own choosing.

I hereby voluntarily waive my statutory right to a hearing and to assistance of counsel. I also agree to the following modification of my Conditions of Probation and Supervised Release or to the proposed extension of my term of supervision:

Substance Abuse Treatment – You must participate in an **inpatient** substance abuse treatment program and follow the rules and regulations of that program. The probation officer will supervise your participation in the program (provider, location, modality, duration, intensity, etc.). You must pay the costs of the program.

Witness _____
U.S. Probation Officer

Signed _____
Probationer or Supervised Releasee
(Nunez, Julio)

10-22-21
Date